BEST AVAILABLE COPY

	PATENT A	PPLICATIO	RD	Application or Docket Number									
Effective October 1, 2001								325200AX1					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			14				R/	ATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BAS	IC FEE	370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			4 minus 20=		* 24		X	X\$ 9=		OR	X\$18=	432	
INDEPENDENT CLAIMS			/D minus 3 =		* 7		X	42=		OR	X84=	588	
MULTIPLE DEPENDENT CLAIM P			RESENT				+140=		·	OR	+280=		
* If the difference in column 1 is less than zero, enter "0" in column 2							TO	TAL		OR	TOTAL	1760	
CLAIMS AS AMENDED - PART II								OTHER THAN					
		(Column 1)		(Colur		(Column 3)	SN	IALL	ENTITY	OR I I	SMALL	ADDI-	
ENT A		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	OUSLY	PRESENT EXTRA	R/	ATE	ADDI- TIONAL FEE		RATE	TIONAL FEE	
AMENDMENT	Total	* 44	Minus	**	4	=	X	9=		ОR	X\$18=		
AME	Independent	* (0	Minus	***	10	= /	X	42=		OR.	X84=)	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+1	40=		OR	+280=		
								TOTAL		OR	TOTAL	/	
ADDIT. FEE ADDIT. FEE ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3)													
AMENDMENT B		CLAIMS REMAINING AFTER - AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X	\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=	X	42=		OR	X84=		
	FIRST PRESE	NTATION OF MU		+1	40=		OR	+280=					
								TOTAL		OR	TOTAL ADDIT. FEE		
ADDIT. FEE													
	,	CLAIMS		HIGH	HEST		_		ADDI-	1	<u> </u>	ADDI-	
AMENDMENT C		REMAINING AFTER AMENDMENT		PREVI	MBER OUSLY FOR	PRESENT EXTRA	R	ATE	TIONAL FEE		RATE	TIONAL	
	Total	*	Minus	**		=	X	\$ 9=		OR	X\$18=		
	Independent	*	Minus	***	-	=	X	42=		OR	X84=		
	FIRST PRESENTATION OF MULTIPLE DEPENDEN							40-	-	1	+280=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+28U=	<u> </u>	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											ADDIT. FEE		
	_	nber Previously Pa					er found in	n the ap	propriate bo	x in c	olumn 1.		